

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.A	1035	9/13/01
RESPONSE FORMALITY REVIEW	H-S	866	9-14-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	11/21/01
2	11/21/01
3	11/21/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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10/19/01
105-22
10/15/01